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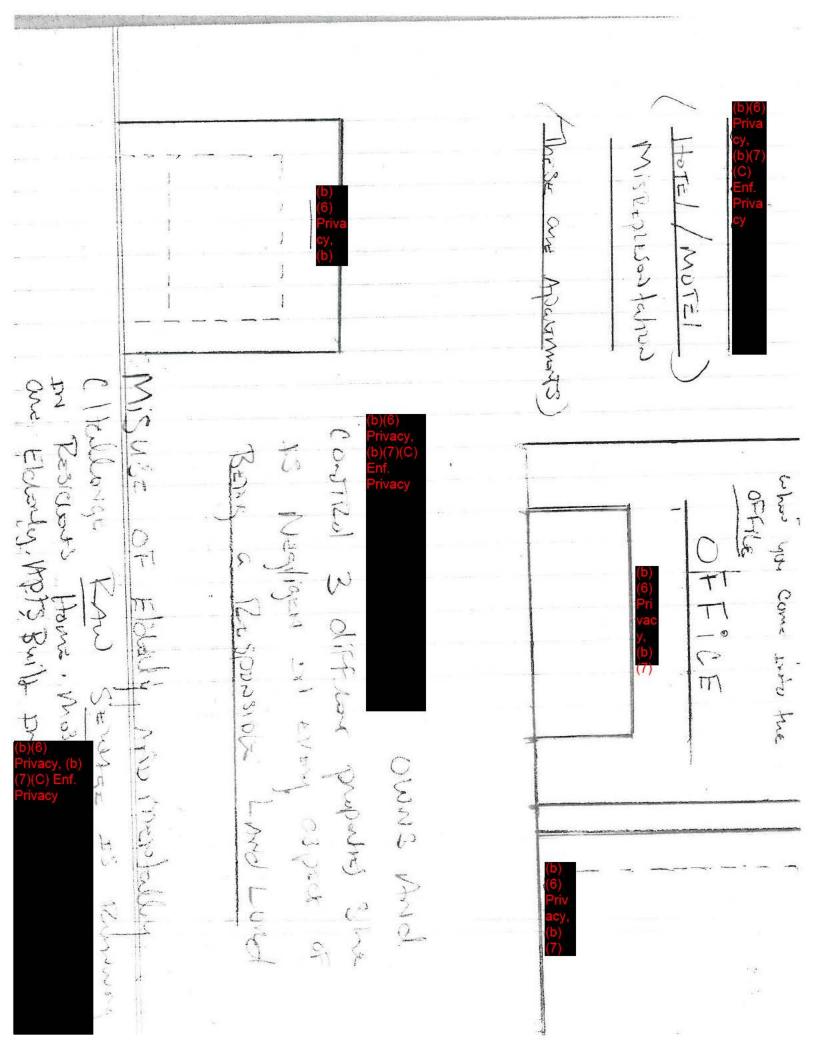
TEVIUS And Power of Attornound/. · How. Copus This is my 2 MP PETMIN For the Roghus el. 26 TO assemble under own constitution. I decided to organize this petition better. Since It's going to do the Attorney General. Our ISSUES as TENESS, EX-TENESS, VISTORS. THEX NONE PISCLOSURE OF HAZURDS CHEMICALS LEAD, Asbetos, MOLE, Safety Hazaros AND Failure TO KEEP Proper Maintonce, Frivery Laws Mail other NEGILTNOS 3. Diffrant Dropoutres (b)(6) Privacy, (b)(7)(C) Enf. P My warms IS (b)(6) Privacy, (b)(7)(C) Enf. Privacy and these people 3 proportises of (b)(6) Privacy, (b)(7)(C) Enf. Privacy live on 1 of LoHS Really. They have me Power To File a Lawsuit upon these Issues I present. ADT IN Phone Alcoras ADT NamE (2)

PEHTION AGAINST For MONE PISCIOURSE HAZARDS AND Fallung (care proven MANTAINER. - PRIVARY Care- MEGAINE

TEMMAS

AND

EX-TENCHES



The Methodist Hospital Emergency Department-Main

6565 Fannin Street Houston, TX 77030-2707 713-441-2245

Totz, Kenneth, DO

Date: 05/28/2012 Patient Address:



Dispense#: 30 (Thirty) tablet

Sig: take 1 tablet by ORAL route once daily As needed Allergy



Dispense#: 15 (Fifteen) capsule

Sig: take 1 capsule by ORAL route every 8 hours As needed

Cough and Congestion

Date: 05/28/2012



The Methodist Hospital Emergency

Department-Main

6565 Fannin Street

Houston, TX 77030-2707

713-441-2245

Totz, Kenneth, DO

Refills: 0 (Zero)

☐ Dispense as Written Totz, Kenneth, DO



Refills: 0 (Zero)

☐ Dispense as Written Totz, Kenneth, DO



The Methodist Hospital Emergency Department-Main

6565 Fannin Street Houston, TX 77030-2707 713-441-2245

Totz, Kenneth, DO

Date: 05/28/2012 Patient Address:



Sig: take 2 capsule by ORAL route one time for 1 day Administration Instructions: -then days 2, 3,4, and 5: take one capsule one time per day.

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Refills: 0 (Zero)

☐ Dispense as Written Totz, Kenneth, DO





October 17, 2012



Houston, TX 77021

Re: Lotts Reality



Dear (b)(6) Privacy, (b)(7)

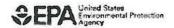
Thank you for your recent correspondence regarding a possible violation of consumer protection laws. Consumer complaints help monitor trends, and assist us in determining enforcement priorities as we work to protect Texans from deceptive business practices.

We will review the information that you have provided, and will contact you if we need additional information. Otherwise, you will not receive further communication from this office regarding your complaint. We do not represent individuals in personal civil matters, and thus cannot take direct action on every complaint.

In matters of statewide significance, or when substantive evidence indicates that a person or business is systemically violating Texas law, the Attorney General may take action on behalf of the collective legal interests of the people of this state.

We appreciate your time and interest in preventing consumer law violations and in the affairs of Texas consumers. We rely on citizens like you to help us enforce the Deceptive Trade Practices Act and other consumer protection laws.

Consumer Protection Division Office of the Attorney General



Enforcement

Report an Environmental Violation

[En Espanol]

OMB #2020-0032

Use this page to report what appears to you as a possible violation of environmental laws and regulations. Information you submit will be forwarded to EPA environmental enforcement personnel or to the appropriate regulatory authority. More information.

What Not to Report

Some issues are primarily concerns of other federal, tribal, state or local agencies. Examples of different situations and who to call.

Emergencies

If you are seeing an environmental event that may lead to immediate threat to human health or the environment, you should report it through the Report Spills and Environmental Violations page. Learn the difference between a possible violation and an emergency.



Information about the suspected violation

Please provide as much information as you can in the form below. Asterisks (*) indicate required fields. If you do not know the name or address o

HOUSTON

* Suspected Violator's name:

* Suspected Violator's address:

* Suspected Violator's city:

* Suspected Violator's state:

77021 * Suspected Violator's zip code:

mm/dd/yyyy

Date of Incident:

Please Select TEVAS TEVAS

If known AS you Rosso this instrumation.

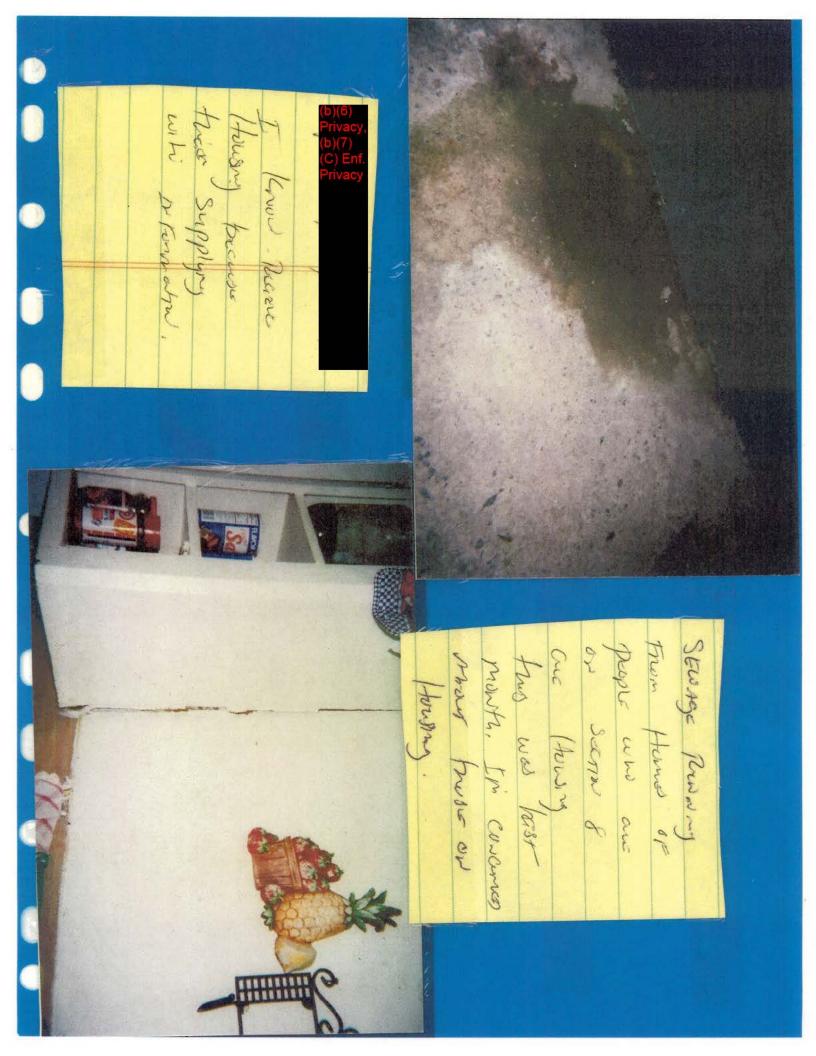
Your contact information

You are not required to provide your contact information in order for EPA to review your tip or complaint. However, if you do not provide contact information, EPA may be unable to contact you for additional information that may be needed to determine whether or not an investigation is warranted. If you do provide contact information, this information may be used to initiate follow-up communications with you and may be shared by EPA with appropriate administrative, law enforcement, and judicial entities engaged in investigating or

adjudicating the tip or complaint. F Your nam Your ema Your phone: Your address: HOUSTON, TEXAS

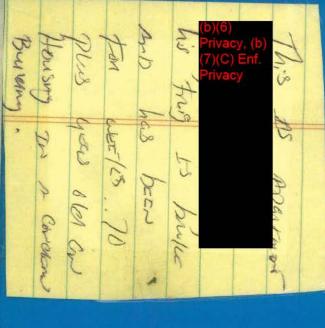
http://www.epa.gov/tips/

2/12/2013





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